

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		<i>10/10/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>21</i>	<i>10/10/00</i>
FORMALITY REVIEW	<i>RT</i>	<i>515</i>	<i>10-30-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here
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BEST AVAILABLE COPY